

DOCUMENT RESUME

ED 079 646

CG 008 106

AUTHOR Vedder, Charles B..
TITLE Drug Failure: The Theoretical Position of the Drop-Out..
INSTITUTION Wichita State Univ., Kans..
SPONS AGENCY Saint Joseph Hospital and Rehabilitation Center, Wichita, Kans..
PUB DATE Apr 73
NOTE 62p.; Paper presented at the Midwest Sociological Society Meeting, 26-28 April 1973, Milwaukee, Wisconsin

EDRS PRICE MF-\$0.65 HC-\$3.29
DESCRIPTORS *Changing Attitudes; Christianity; *Cultural Factors; *Drug Abuse; *Drug Addiction; Health; Marijuana; *Rehabilitation; Relocation; Social Attitudes

ABSTRACT

This paper examines the theoretical position of the person who drops out of illegal drug use. A person was considered a drop-out if he admittedly no longer used any or all the drugs in the following categories: marijuana, hallucinogens, speed, downers, and inhalants. A purposive sample was drawn to capture as many people fitting this criterion as possible. Two hundred and fifty non-institutionalized subjects were contacted and interviewed. Some major quitting contingencies which appear to act across all drug categories are: the early or late occurrence of bad mental or physical experiences on drugs, geographic mobility away from the drug scene, the gradual development of meditation as a substitute for drug use, an abrupt conversion to Christianity at the height of one's career, negative social pressure from significant or more generalized others, and the widespread tendency to "burn out" or simply lose interest after long term use of street drugs. Patterns specific to each type of drug are also discussed. (Author/NMF)

ED 079646

U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
NATIONAL INSTITUTE OF
EDUCATION

THIS DOCUMENT HAS BEEN REPRO-
DUCED EXACTLY AS RECEIVED FROM
THE PERSON OR ORGANIZATION ORIGIN-
ATING IT. POINTS OF VIEW OR OPINIONS
STATED DO NOT NECESSARILY REPRESENT
OFFICIAL NATIONAL INSTITUTE OF
EDUCATION POSITION OR POLICY.

DRUG FAILURE:

The Theoretical Position of the Drop-Out

by

Charles B. Vedder
Wichita State University

The research reported herein was
supported by an initial grant from the
E. S. Edgerton Medical Research Foundation
St. Joseph Hospital and Rehabilitation Center
Wichita, Kansas 67218

Presented in the section on Youth and Deviance,
1973 Annual Meeting of the Midwest Sociological
Society, Milwaukee, Wisconsin, April 26-28.

CG 008 106

Abstract

This paper examines the theoretical position of the person who drops out of illegal drug use. A person was considered a drop-out if he admittedly no longer used any or all the drugs in the following categories: marijuana, hallucinogens, speed, downers, and inhalants. A purposive sample was drawn to capture as many people fitting this criterion as possible. Two hundred and fifty non-institutionalized subjects were contacted and interviewed in an open-ended format which focused on issues of why the subject quit using the above-mentioned drugs. These tape-recorded interviews were then content-analyzed by the principal investigator and his assistant in a manner which ensured their independence. These written statements served as data for this paper. Only phenomenologically clear patterns of quitting are discussed. The ex-drug-user's point of view, not the researcher's, is taken as the grounding for these statements. Some major quitting contingencies which appear to act across all drug categories are: the early or late occurrence of bad mental or physical experiences on drugs, geographic mobility away from the drug scene, the gradual development of meditation as a substitute for drug use,

an abrupt conversion to Christianity at the height of one's career, negative social pressure from significant or more generalized others, and the widespread tendency to "burn out" or simply lose interest after long term use of street drugs. Patterns specific to each type of drug are also discussed.

STATEMENT OF THE PROBLEM

The purpose of this paper is to discover why persons quit using various illegal drugs. All users questioned in this regard were currently "on the street" although some had been previously institutionalized for their drug use or related habits.

Originally, four major types or categories of drugs were to be included in this study: the hallucinogens (including marijuana), downers, uppers, and inhalants.¹

It was later shown that our inclusion of marijuana with the major hallucinogens was a mistake. Users consider them separate and provide different reasons for quitting in each case. As a result, five categories of drugs were used in the actual analysis, with marijuana serving as a separate category.

Who is a drug-quitter proved to be a ticklish issue, both on the theoretical and on the operational level. On the theoretical level it conceptually refers to persons who have "psychologically" quit a drug for good. This, of course, has drawbacks in the "real world" situation since the human animal frequently reneges even on deep-seated convictions which he freely expresses in other contexts. This difficulty was reflected on the opera-

tional level of this study. We would contact subjects and ask them what they quit. This would draw an immediate response. Subsequent probing, however, would only prove how shaky this commitment was, with answers varying from, "I would never use it under any circumstances," to "I no longer seek the drug out - but I might use it under some circumstances, such as ..." Assuming that these definitional issues are real to the street user and do not represent a failing in the author's sociological training this nebulousness can't be avoided.

We settled on the following procedure: a potential subject was contacted personally or by phone and asked if he "quit any drugs". It was explained that by quitting we meant that the subject was not currently using the drug and did not plan to use it again in the future. That he might ever use the drug again was not an argument we cared to pursue or tried to quash for the purposes of this study. When a subject met this loose criterion, an interview was requested. Although no record was kept of refusal rate, it appeared to be relatively small. Most refusals came from friends of the interviewers, surprisingly enough. In some cases they were successfully reassigned to a less familiar interviewer. Institutionalized drug users were not used in this study since

it was felt their responses would be colored by a completely different motivational pattern than was true of the "free" subjects.

IMPORTANCE OF THE QUESTION

Presumably, if we are able to find out why persons quit using various illegal drugs, we may simultaneously discover why others continue. That is, the contingencies that lead persons out of drugs, if they are relevant at all, should somehow be avoided by the current user. The user must consciously or unconsciously structure his cognitions or environment in such a way as to avoid the "press" of variables which are in their world and exert a negative influence on continued use.

There is no reason, of course, why one could not have started with the reciprocal question, why and in what way do persons use drugs? This question has certainly been asked before in similar designs (Becker, 1953; Carey, 1968; Carey and Mandel, 1968; Finestone, 1957; Klein and Phillips, 1968; Larner and Tefferteller, 1964; Lindesmith, 1947; Ray, 1961; Sutter, 1965).

There were several reasons for deciding to start with drug "failures" rather than with current users. First, in the literature employing a "users" perspective, it

appears as though the respondents tend to "overdramatize" the import of their choice. Perhaps this is done in an effort to appear normal to a researcher who, they perceive, does not share their commitment. Whatever the reason, starting with the quitter should avoid this tendency, thereby making the cataloging of "quitting contingencies" more valid. Second, drug "failures" are fewer in number than drug users (from pretest survey data), which facilitates sampling a fuller range of persons in this category. Finally, a drug "failure" is less likely to be defensive about information he shares with the researcher than is a drug user since the information is legally "cool" in the former, but not in the latter situation. Thus, ex-users should be easier to identify and interview in a candid manner without the need for a long-term prior development of rapport.

METHODOLOGY

The actual study was conducted during an advanced undergraduate and graduate research course in the area of deviant behavior. Thirty-three students enrolled in the project. Almost all had had some experience with drug use or with the street culture. Those that did not were assigned books to read which would bring them up to

date in this regard.

Each student in the course was urged to find ten ex-drug-users to interview. Although an effort was made to impress upon the staff the importance of sampling from a wide variety of social and drug experiences, we were aware that "randomness" would not be achieved by this method. However, since our overriding purpose was to uncover factors which lead to quitting and not to make statements about the relative import of each factor listed in some hierarchy of importance, the procedure should be adequate. Unfortunately there is a strong tendency for our overall sample to be biased in the direction of high school and college age students who are primarily middle class whites. Since there is a noticeable lack of subjects who comprise the lower and upper class drug scene, our results cannot be realistically extended to include these groups.

Most of the student researchers followed a snowball-type sampling procedure. That is, as friend respondents were interviewed, they were subsequently asked to make contact with other potential subjects who were previously unfamiliar with the interviewer. Where this could not be done, the principal investigator made classroom inquiries in an effort to provide an additional pool of subjects.

No central list of names was kept of those persons interviewed in order to insure their anonymity. A sample copy of the interview schedule is presented below:

Interview Schedule

This is only a guide - sequence may be different for your case, etc. However, please spend most of your effort on #3 if your subject is willing to talk about these things.

1. Demographic Information:

Age
Race
Sex
Occupation
Marital Status
Living Pattern
(Anything else you think may be important)

2. Pattern of drug use (hit all drugs used briefly):

What?
How Often?
When Start - Stop?
Take alone, with friends, etc.?

3. Reasons for quitting (select out for discussion those drugs the person has ceased using):

Get more specific detail as to use (Q2), e.g. first time, last time, pattern, bad trips, how defined experience, supply, etc. Then concentrate on why quit

4. Round out interview - fill in gaps you feel need elaboration.

5. Record time, place (not address), etc., of interview.

ANALYSIS

Overall, 245 useable tapes were gathered. The next step was to shrink down the data to a more useable form. Transcribing proved to be out of the question due to the enormous expense that would have been involved. As a substitute, two coders independently transcribed the important demographic and drug information onto case record sheets in a manner synonymous with note-taking. Two coders were used to get some idea of the reliability of this procedure. After several tapes, it was clearly evident that one protocol merely rounded out the other without adding any new information. Thus, we had some hope that our procedure was not adding new biases to the data. This same procedure was thus followed for the remaining tapes. A separate file was kept on each subject.

The next step was to color code all information referring to specific types of drugs used in the protocol itself. The use - quit information was also placed on the outside of the case jacket for quick visual reference by the investigator. The sex, age and race of the subject was also recorded on the outside of the file to see if they emerged as important variables to consider, since

their import would not be conscious to the subjects themselves in most cases, and, as such, would not appear in case narratives.

The next step was to go through each drug individually - case by case - in order to isolate the quitting patterns that were unique to each drug as well as those patterns which cut across all five categories of drug failure. The results of this analysis are presented in the remaining portion of this manuscript.

A FALSE START

The first drug pattern to be deciphered was marijuana. The way we originally went about it, however, proved to be a mistake. That is, subjects were sorted logically into users of marijuana only; then users of marijuana and one other drug, with this broken down by the type of drug; then marijuana users and two drugs, this again broken down by types of drugs, and so on through all five types of drugs.

This yielded 16 neat little categories of use, but very little else. After plowing through the 242 cases over and over again, this error became more and more apparent. While there appeared to be a pattern emerging in the data, it was not breaking along such "logical"

lines. It also had nothing to do with marijuana per se. Rather, it reflected the subjects' total involvement with illegal drugs and the drug community at the time of heaviest use. That is, the sample split itself nicely between those who used drugs heavily and were deeply involved in the drug subculture, and those who used drugs lightly, with a more experimental frame of mind.

Thus, we reshuffled the data, collapsing it into two groups: those with a heavy and those with a light commitment to drug use in the past. This sorting was relatively easy to do with the exception of those cases where persons had heavy speed careers which got their impetus under a doctor's care, and those who had heavy heroin careers dating prior to the drug movement of the middle 60's. In the end, both types of cases were included in the heavy drug use category because subjects openly admitted their possible or actual addiction to these drugs.

Over all, heavy users are distinguishable from light users on the following dimensions: a greater tendency to glamorize their drug careers, a tendency to travel around the country in order to buy and sell drugs in quantity at a profit, the greater likelihood of living in a "mixed" communal situation, and the pronounced tendency to have experienced a much wider variety of drugs than the

average user. The use of "hard narcotics" of any kind or needles to inject drugs do not seem to be major defining factors, since many light users "hit" drugs one or a number of times just to "see what it is like."

Since the above sorting is connected with the general pattern of drug use and failure, and not with marijuana, attention will presently focus on the general reasons for quitting which cut across all drug types. Specific patterns peculiar to each drug type will be presented later.

THE GENERAL PATTERN
(Heavy career drug users only)

After dividing the total sample into heavy and light career drug patterns, numbering 107 and 135 respectively, the data was examined again to see if these two types could be broken down further along phenomenologically meaningful lines. For the light users this was not possible. Nothing appeared common across all drugs for these subjects; rather, the information given was specific to each drug terminated.

For the 107 heavy users, however, this was not the case. Here there is a common tendency for one major overriding reason to cut across the cessation of all drugs. The general pattern gets the major attention in

the subject's discussion of his career with the specific reasons for quitting each and every drug being glossed over. Thus, for the heavy commitment half of the sample, it is the general reason that achieves prominence.

Thus, the following remarks refer only to the 107 heavy users of illegal drugs. Of these, only 100 are usable since in 7 cases no evidence can be found to indicate the subjects quit any drugs. The author will limit himself to minimal comments in this section, preferring to let the subjects speak for themselves.

Meditation as an Alternative - (Thirteen Cases)
(Heavy career drug users only)

The comments listed below are actual or close to actual quotations drawn from the 13 subjects themselves, which indicate the general effect that meditation, yoga, or mind expansion of a similar sort has had on ceasing their entire drug career. These are all general statements that apply to no specific drug. They are listed here to give the reader the flavor of the meditation alternative.

nothing left to learn from drugs - they taught
me what was possible with the human mind
when I got stable - didn't need drugs
meditation introduced a new level of calmness
that was maintained from day to day
meditation is the key to life, rather than
drugs

drugs are good - meditation is better
 Yoga - I can get to that (drug) state anytime
 I want to
 meditation does not go with drugs - its like
 cleaning yourself out - drugs are some-
 thing you put in
 have a good feeling about drugs - widened my
 consciousness - I've reached a new level -
 if you stay on drugs you're in a rut
 (drugs) I got a hell of a lot out of them -
 see meditation as the next step
 began to look inward without drugs
 (meditation) I moved into something that could
 expand my consciousness without drugs
 drugs fell away in importance when my mind
 began expanding on its own
 something told me that the way I was taking
 drugs was not harmonious - you can get
 high without drugs - there are other ways
 of increasing awareness such as meditation

Christianity as an Alternative - (Twelve Subjects)
 (Heavy career drug users only)

In this category subjects find Christian teachings
 and a belief in Christ as an alternative to drug use.
 This pattern is phenomenologically quite different than
 the former. When a religious commitment is involved,
 subjects are typically heavily immersed in their drug
 career at the time. However, during this same "peak"
 period they are beginning to flounder on the issue of
 whether drugs are really helping them or not. It is at
 this point that some precipitating "religious" event may
 occur which typically swings the user radically in the
 direction of Christian beliefs as far as drugs or their
 entire lifestyle is concerned. The nature of these pre-

cipitating events should be clear in the descriptive statements presented below.

The meditators, on the other hand, do not exhibit any such radical shift. Rather, theirs is a natural progression out of drugs as interest in meditation grows. That is, subjects in this case began perceiving that drugs were not helping them long before they were fully committed to meditation. As their drug use decreased their interest in meditation increased until the former simply disappeared and the latter took its place. No precipitating event was necessary. Finally, the meditators appear in no danger of slipping back into drug use, whereas the converts to Christianity are. The "Jesus freaks" describe their strong commitments to religion in precisely this way - that without it they would slip back into evil. The general statements that refer to this major quitting contingency are listed below. All twelve subjects are represented.

- (21 year old female who had been in a mental institution prior) one year ago I broke a vicious cycle of drugs, physical moves, more drugs, etc. - was desolate - talked to a girlfriend and her boyfriend who both accepted the Lord - they seemed free - they worked on me for two months - on October 4th I accepted the Lord - moved into a Christian house after that
- (33 year old female, seeing a psychiatrist at this time) many nervous breakdowns - something was missing in my life - hated

myself and drugs numbed it - found herself when she joined a Pentacostal church - on August 20th I was saved - no drink, dope, or sex since

got restless with the drug scene - a "brother" (Christian) picked me up after a long time on the road - "I saw something in him I didn't have" - I went 700 miles with him - by 500 miles I asked Christ into my heart - I felt that peace - (S relapsed once) - another "brother" brought him back out - he (the "brother") said "Satan is trying to get me back in chains" so I quit completely

I quit because a better life found me - booze, drugs and balling couldn't fill that gap - many times I was hassled by Jesus freaks - they seemed plastic to me - then I ran into the Lord - quit drugs in June of 1972

I saw God on an acid trip - he reviewed my life - past and future - saw I would end up in prison so I quit - I am a "Jesus freak" now after that trip

my husband and I got into "the Way" (a Christian sect) - that turned us onto something where we didn't need drugs - that's when we quit

two years ago I met some Christians at Big Bear Lake, California (some were old friends) - saw the change that occurred in their lives without drugs

I'm a Jesus freak now - go to church and read the bible - (this came after he quit) - keeps me from going back

a friend convinced me that God didn't want me to do drugs - got into God while doing acid - only positive effect of drug use gradual quitting - get high now on religion drugs added to the confusion in my life - quit drugs because of the Lord - I was blind before

crashed at "His place" (a free Christian house) - what fascinated me is how at "His place" people could live with God and enjoy it - prior to this Christianity was just one big fairy tale to me - I went to "basic" and was converted - saw 500 kids radiating

Christ - I wasn't delivered from cigarettes 'til two days later

Social Pressure from Specific or General Others as
an Alternative - (Twentythree Cases)
(Heavy career drug users only)

By "others" is meant other people, whether they be specific others or more general categories of others who serve as points of reference for the subject, and who disapprove of drug use. For the sake of clarity, we will break this overall pattern down into these two types.

A specific other served as a quitting contingency for 10 subjects and more general societal others terminated the careers of 13 others. The specific others are presented first. All are not represented here because some did not make reference to the specific other who affected their drug use in a general statement, preferring to use them in discussions of specific drugs only. As such, they will not appear until the specific drug types are discussed.

Specific Others, 10 subjects:

it just got me into trouble with the law -
I quit because my girlfriend wanted me
to - quit hanging around with drug
freak friends
close to getting busted - had an offer to buy
morphine - know my girl wouldn't like it
met my girl (wife) one year before I quit -
she drew me into a less drug-using crowd
got busted, but it had no effect - slowed
down - couldn't get it on with old
friends who got high - one reason my wife

and I quit was we decided each other
 was security enough
 quit about the same time my husband quit -
 mutual decision
 decision with girl to quit - involved having
 a baby - brain damage, etc.
 my girlfriend helped me (across all drugs)

More general others, 13 subjects:

law was catching up - choice of being busted
 for going to a rehabilitation agency in
 New Jersey - took the latter
 I just did a lot of dope when I'm around peo-
 ple who do dope - now S is cutting back
 "at the same time my other friends are
 getting into meditation" - S feels like
 trying it
 originally the drug community was political
 "change", "peace" - after two years I
 realized all talk, no action - fear of
 bust growing - boyfriend busted - got a
 job at a rehabilitation agency
 going with a guy who did drugs - relationship
 started breaking up - that's when I star-
 ted to quit - changed friends - rejected
 drugs to close gap between me and what I
 wanted to be - started work in counsel-
 ling field - friends drifting into hard
 narcotics
 poor grades in college influenced my decision -
 rejects new friends who are caught up in
 drugs - didn't like what I was doing -
 "wasting time"
 divorced wife three or four times because of
 drugs - was obnoxious on drugs - people
 asked me to leave - paranoid - back in
 school now and in AA for alcoholic prob-
 lems - do not want to slip
 lives with a cop - does what's easy to hide
 only - pills - no grass
 got nervous about getting busted later in
 career - moved to get away from using
 friends - wanted to come back to college -
 busy now - art classes - works in a hos-
 pital

feels those who offer her drugs are testing
 her commitment to quit - wouldn't respect
 her if she gave in - roommates were self-
 centered on drugs - the house she lived
 in was busted - works for a rehab agency
 legal problems bother her - moved from friends
 she took drugs with - her willpower is
 not that strong

Getting "Burned Out" as a Route Out of Drug Use -
(Fifty Cases)
 (Heavy career drug users only)

Being "burned out" is a frequently used term in all
 100 tapes, and usually refers to the subject's feeling
 that he is taking too much of a drug, is getting bad
 effects from a previously pleasant drug, or is losing
 his mental or physical stability because of drug use.
 It is also interesting that while being "burned out"
 is frequently offered as a common reason for quitting
 across all specific drugs, it is rarely used to describe
 the total quitting pattern in general. As such, rather
 than try to abstract an overall pattern for specific
 references, the "general" statements listed below serve
 more as correlates to being "burned out" than as synonyms
 for the concept itself. What being "burned out" means
 with respect to specific drugs can be clearly seen in
 the section on hallucinogens presented in a later section.

getting out of drug dealing - too much hassle -
 afraid of going back to jail
 its (dealing) a big rat race

used a lot of dope to try to get marriage back together - worked for awhile

overall, drugs took him away from the pattern he was raised to live - defeated drugs through a "morality struggle"

I hate to get stuck with one drug - I like variety

S feel a strong tendency to be psychologically addicted

"get in a rut when do too much"

must now plan for the future - can no longer afford the time, like the summer of '69

overriding fear of chemical drugs

because of the effect of drugs, my 25 best

friends became my 25 worst enemies -

once I find myself "really liking" a drug

I will quit it - I don't want to get

strung out on it - too much of a mental hassle

it got to the point where I couldn't keep up financially with drug use

"if they gave it to me (female, age 22) I took

it" - quit all drugs at once - got scared

this one time - didn't know what it was -

felt like bugs were crawling on me - 2 to 3 day blank periods

personal appearance went down - lost 30 pounds -

used a variety of drugs intensely for one year

you grow out of it

worried about handling drugs in public - fear of getting busted

I don't worry about being addicted until I am addicted

I felt, in the beginning, drugs should have a point - lost their point later on

after awhile I realized there was no trip to

it - just up, down, up, down, up, down -

when drugs got to be a part of the everyday hassle we decided to quit

only through my own stupidity that I started in the first place - enjoyed after the trip more than the trip - a relief to come down

if you hide something (drugs) it affects how you relate to other people in general -

drugs were a wrong choice I took -
still doing a lot to patch it up
has jumped bond and is still running from
the law

Actual Physical Damage as a Contingency in Drug
Failure - (Two Cases)
(Heavy career drug users only)

Both cases involve 17 year old girls who had extensive needle careers for both speed and downers. In both cases hepatitis was diagnosed at approximately the peak of their careers. Both girls give the impression that drug use would have continued without much letup had it not been for the hepatitis.

MARIJUANA

In this section we will examine the use and discontinuance of marijuana and its derivatives. By derivatives is meant: kif, hashish, hash oil, and synthetic THC. All but three persons in our entire sample had used marijuana or one of its derivatives at least once. Therefore, this is a good place to present the data which describes the "user patterns" in our entire sample along with the data dealing with marijuana "failure" in particular. This is summarized in Table 1 below.

TABLE 1 ABOUT HERE

As can be seen from Table 1 over half, 60%, of the marijuana users are still using the drug at least occasionally. Also there is a fairly strong tendency for the light career users to drop the drug more readily than the heavy career users -- 45% quitters in the former group as compared to 34% in the latter. This pattern is not maintained for drugs other than marijuana. Also, for the light career drug users only, there is a strong tendency for those who sampled a wide variety of drugs to retain marijuana in their repertoire longer than is true of the users of marijuana only. Finally, the relative popularity of drugs other than marijuana are in order: psychedelics - 81%; speed - 72%; downers - 55% and inhalants - 8%.

Since our total sample was already broken into light and heavy career drug users, the investigator began sorting within each unit separately. It became apparent that, in the light career group, the marijuana quitters could be differentiated into two groups: those that never did like the drug versus those that did.

No similar separation could be made in the heavy drug use category, since all but one or two had grown quite accustomed to the drug over a long period of exten-

sive use. If marijuana was no longer used in this group it was due, not to the character of the drug itself (like or dislike), but to the overriding quitting contingency which cut across all drugs regardless of type.

The light career drug user groups, on the other hand, gave drug specific reasons for quitting marijuana, for the most part. What those reasons were, then, depended on their original interest or lack of interest in the drug. As such, more time must be spent on the light career half of the sample.

When the distinction between originally positive or negative impressions of marijuana emerged from the data, we broke the light career drug user group into two halves. Table 2 reflects this breakdown as it regards the use of other drugs. This table is comprised of the 61 drug quitters in the light category, or approximately 45% of the total light career drug user group.

TABLE 2 ABOUT HERE

As can be seen from Table 2, there is no real difference between those who originally like and those who do not like marijuana, and their subsequent use of other drugs. The percentages are quite comparable in this

regard, with perhaps a slight tendency for the original likers of marijuana to try something else.

The only distinction that could be found between the initial likers and dislikers of marijuana who had quit is that there is a relatively strong sex bias in the data, with women tending to predominate in the original dislike category. This is illustrated in Table 3.

TABLE 3 ABOUT HERE

Turning now to an analysis of why persons quit using marijuana or its derivatives in the light career drug user group, four distinct patterns emerge for those who originally did not like the substance and six patterns emerge for those who defined initial use as pleasureable. While both groups appear to start for the same reasons (with curiosity, group pressure, and situational availability predominating) they differ as to their reasons for quitting. First, we will look at those subjects who were initially disappointed in the drug.

Strong Dislike of Mental Effects - (Nine Cases)
(Light career drug users - initially disliked marijuana)

This pattern is characterized by an initial strong negative reaction to the mental and behavioral effects

caused by the drug itself. Some typical responses are listed below.

I felt panicky (3 cases)
 couldn't focus my thought (2 cases)
 felt irresponsible with my children in the
 next room
 I seemed uncoordinated
 I was incoherent

Other unrelated reasons for quitting sometimes accompany these core responses, of course. However, space constraints do not allow us to present these variables at this time. Therefore, for the remaining types of quitting patterns, only those reactions most typical for the pattern will be given.

Strong Physical or Mild Negative Mental Effects -
(Six Cases)
 (Light career users - initially disliked marijuana)

In this pattern, the reasons for quitting surround immediate physical or less powerful emotional reactions caused by the drug marijuana. Typical responses are given below.

I got physically ill on it (3 cases)
 it gave me a headache (2 cases)
 marijuana makes me depressed

Marijuana as a "Nothing Experience" - (Five Cases)
 (Light career drug users - initially disliked marijuana)

In this pattern the subjects quit because marijuana had no effect on them or such a slight effect that it

went unperceived as anything "new" or "important" by the subjects. Some typical response are:

never really got off on it (3 cases)
booze is better
I was just curious - now I'm satisfied

Removal of "Coercion to Use" - (Two Cases)
(Light career drug users - initially disliked marijuana)

Both of the subjects are female. Their pattern is characterized by a boyfriend in one case and a husband in another forcing them to use marijuana because they (the males) regularly imbibed. When the wife gave her husband an ultimatum to quit marijuana and the girl abandoned the boyfriend, that ended the pattern.

Attention will now be turned to an examination of the six types of quitting patterns that are found for those subjects who reported they enjoyed the effects of marijuana, at least initially. The quitting contingencies which characterized the first group do not carry over here, since continued use was the pattern and reasons for quitting had to be more "firm" as a result.

Social Pressure from Specific and General Others -
(Twentythree Cases)
(light career drug users - initially liked marijuana)

Pressure from a specific other is the most frequent pattern in this group: 13 cases. For five women and three men it was a spouse who did not want them to use

marijuana. For two others it was a girl- and a boyfriend who regulated the subject's marijuana use. Other significant individuals were: a pastor, parents, a close friend, a brother, and a religious grandmother.

The general others situation applies to 10 cases. By general others is meant literally "other people in general" who don't do drugs. This could be persons who view one's performance on the job, one's church congregation, respectable society, or any other anti-drug set of others. In 3 of the 10 cases the subject had a new job he did not want to jeopardize. Other common general others patterns were:

- graduating from college and gaining more responsibility
- not being able to do well in school stoned - (2 cases)
- having a clear view of the future now
- my proficiency in sports was dropping (2 subjects)
- quitting for self-betterment
- the "church" wouldn't approve
- too time consuming
- was getting nothing done
- getting older
- paranoid of the law

Geographical Change - (Six Cases)
(light career drug users - initially liked marijuana)

In this case it was an actual physical move that took the subject away from his drug using environment. In four cases the subjects were servicemen, two from

Viet Nam, one from Korea and one from Okinawa. Of the remaining two cases, one was a student teacher in Africa, and the other stayed in his present location with his user friends disappearing to different colleges, leaving the subject without a supply. Factors which are mentioned as reasons for quitting in this group are:

no reason to use when I came back
 too dangerous back here
 the law is more strict in the states
 I'm not bored back here
 less pressure back here - so no need to escape
 the quality of marijuana is no good here

Negative Mental or Physical Side Effects from
Marijuana Use - (Five Cases)
 (light career drug users - initially like marijuana)

This pattern is characterized by perceived negative physical (2 cases) or mental (3 cases) side effects from occasional to heavy marijuana use. Some commonly mentioned items are:

strung out from too much weed
 self and others beginning to exhibit memory
 loss (2 subjects)
 having trouble functioning
 overdosed on grass and hash and got physically
 ill (2 subjects)
 grass highs became like acid highs

Meditation as an Alternative - (Two Cases)
 (light career drug users - initially liked marijuana)

This pattern is really a miniature of the more general meditation pattern, except that it is specific to

marijuana in this case. Some statements are:

into Yoga
I don't want to contaminate my body
meditation is better

Getting "Burned Out" as a Route Out of Marijuana Use -
(Three Cases)

(light career drug users - initially liked marijuana)

The "burned out" pattern in this case is also quite similar to the more general pattern discussed earlier, except it is far less serious in this case. Being "burned out" on marijuana differs from the category preceding meditation in that no specific symptomatology is mentioned other than being "burned out".

When we turn our attention to the heavy drug user, a number of differences appear. The heavy user is unlikely to quit marijuana because of the specific effects of the drug, as is the light user. Rather, if the heavy user drops marijuana at all, it is due to a more general pattern which takes other drugs along with it - marijuana usually being the last to go. Also, since the more general pattern of drug quitting prevails, no additional information can be added in this section, other than to indicate how many quitters and continual users there are in the major drug-quitting areas for the heavy user. This data is provided in Table 4 below.

TABLE 4 ABOUT HERE

It is interesting to note that the "burn-outs", the largest category, have the fewest marijuana quitters. This makes sense in light of the fact that "burning out" reflects a general over-use of drugs rather than the impact of some outside variable on the drug user's habit. Since marijuana is a relatively mild drug, compared to the others, use of it tends to continue.

Table 5 summarizes the marijuana data presented so far. As can be seen from this table, as use of the drug

TABLE 5 ABOUT HERE

or drugs in general gets heavier, the variables that affect quitting get more "weighty" in their significance. That is, as drug use gets heavier the reasons for quitting marijuana involve more and more of a total commitment or world view change on the part of the user. At low levels of drug use, no such identity transformation is evident.

PSYCHEDELICS

Psychedelics were used at least once by 81% of our

subject population. It is the user's experience with these drugs which seem to give the most shape to his drug career pattern.

First use of these drugs does not seem to generate the same immediate quitting decision if results are negative (sometimes quite severe) as is the case for marijuana. Psychedelic users are more experienced (all but one were grass users) and seem to recognize the volatile or varied nature of the drug's effects on the personality of the user. Their final judgment about the drug is usually suspended until several samplings have occurred.

As a result, the light career drug users will go undifferentiated (by originally liked or disliked psychedelics) for this analysis since the reasons for quitting are phenomenally the same in either case. Also, most of the statements in this section refer to LSD, where undefined since impressions of the organic hallucinogens such as mescaline, psilocybin, and peyote tend to be more subdued, and are usually clearly indicated by the subject. Looking at the light career drug users first, eight typical "exits" can be found from psychedelics. These cases include 86 quitters or 91% of all psychedelic users in the light career drug pattern.

Psychedelics as a "Nothing Experience" -
 (Twelve Cases)
 (light career drug users)

Surprisingly enough, a rather large proportion of light users defined the psychedelic experience as rather "blah". This could be simply due to the user's inability to locate a "potent" drug, of course. The following comments are typical:

acid is more boring than grass
 got boring
 weak experience - I could see no benefit to it
 at all
 no insights - didn't change anything
 nice - but, so what
 never any big deal
 I expected too much from it
 never any strong experience
 hardly any experience at all - no reason to
 continue

Psychedelics "Too Intense" and Experience -
 (Twenty Cases)
 (light career drug users)

This category characterizes the occasional users who obtain psychedelics which are "too potent", or at least define them as such. None of the subjects indicated the typical "freak-out" pattern of a bad trip, but only that the experience was too powerful. Some typical statements are:

too intense (2 cases)
 up too long
 unsure of self-judgment on the drug

never could overcome paranoia
 not together enough to do it again
 it started scaring me
 acid is a difficult experience
 mescaline makes me jangly
 jangled me mentally and emotionally
 too much for the body to handle
 too strong - wasn't aware of what I was doing
 afraid of it
 "too good" (3 cases)
 "tripped me out"
 too intense to enjoy (3 cases)

"Bad Trips" Early in Career Terminate Psychedelic Use -
(Ten Cases)
 (light career drug users)

In this situation the use of psychedelics was relatively infrequent but always "bad". Subjects in this category defined the experience as a "bad trip", rather than simply an intense experience. Some specific examples of these trips are illustrated below.

two girls swallowed the saturated cotton in a Wyamine nose inhaler and hallucinated for 12 hours - perceived that a series of rock stars e.g. Jimmi Hendrix, Simon and Garfunkel were supplying them the keys to life - they missed the first message and consequently freaked out

the girl took LSD with her boyfriend and his face kept changing into a pig and a weasel - the second time she took it everyone looked like Porky Pig

he took LSD with some friends - they ran through a high school tearing speakers off the wall - that frightened him

subject took a tab of LSD with friends - experienced an intense fear for three days

subject's first LSD trip - he experienced tendencies towards violence he felt were not characteristic of him

The other cases in this category are similar, although perhaps less dramatic, with every ingestion of a psychedelic defined as a "bad trip".

"Bad Trips" Appearing Toward End of Psychedelic Career -
(Thirteen Cases)
 (light career drug users)

In this category the subjects have taken LSD more than once and, in some cases, as many as 100 times. All defined the early experiences as pleasant, but mentioned that latter experiences with the drugs were ending in "bad trips". It is after one of these "bad trips" that the subjects quit. Some comments referring to these specific instances are illustrated below, along with some general comments.

bad trips toward end
 strong sense of fear coming down
 on my last trip I got lost in a cab on Okinawa
 on my last trip I felt I was not coming down -
 lost reality - like experiencing hell
 animals all around, staring at me
 heard and saw a freight train outside my bedroom door
 was left out of the conversation and started
 crying and screaming

Social Pressure from Specific (Five Cases) -
More General Others (Five Cases)
 (Light career drug users)

This category has already been defined earlier in the manuscript. Typical statements referring to psychedelics and specific others are:

boyfriend said no
 wife against it
 quit at my stag party
 quit prior to marriage
 my brother said there is nothing to it

The more general other pattern is also represented by 5 cases. Typical statements in this category are listed below:

realized I used it as an escape
 lost the friend she used it with
 a good friend "bad-tripped" on it so I quit
 wasn't getting anywhere on it
 getting older - nothing done
 quit for self-betterment
 got a job at a drug rehabilitation agency
 it was hurting my college GPA
 saw my friends getting busted

Meditation or Mind Expansion as an Alternative to
 Psychedelic Use - (Twelve Cases)
 (light career drug users)

The meditation pattern is identical to the "general" pattern, so the comments below refer specifically to meditation as it relates to quitting a psychedelic.

got less out of acid through time and more
 into Yoga (2 cases)
 S wants to learn to see "this way" without
 acid
 negative effect on the nervous system (2 subjects)
 got into mysticism
 did all it could for me (2 subjects)
 I'm on a natural high now
 learned all I could from it
 LSD doesn't fit with the tradition of the
 spiritual quest (S an American Indian)

Potential or Perceived Physical Damage Caused by
Psychedelics - (Nine Cases)
 (light career drug users)

This group is characterized primarily by those concerned with the purity of street psychedelics and by those who've experienced the "wrath" of organic peyote.

Some typical comments are:

doesn't like the physical effects on acid
 fear impure drugs
 fears junk and street drugs
 got sick on peyote (2 cases)
 fears chromosome or mental damage (2 cases)
 thinks pills will harm you
 can't tell what you're getting
 Strychnine in poor street drugs
 "it's the after-effects that are going to stay
 with you"
 possible physical risk
 side-effects

When we turn our attention away from the light users to those with heavier experience, the "general" categories prevail. However, since it is largely the psychedelic experience which generated the overall pattern, it cannot be glossed over. Table 6 illustrates the pattern of psychedelic use for the heavy users.

TABLE 6 ABOUT HERE

Meditation as an Alternative to Psychedelic Use -
(Thirteen Cases)
 (heavy career drug users)

The following statements are typical of the relationship between psychedelic use and meditation as a contingency which leads to quitting. Some typical statements are:

seemed like a bore after awhile
 set you on a new wave-length
 learned to control it rather than the reverse -
 didn't learn after that
 after the sixth or seventh trip no longer consciousness expanding - a sameness about it
 don't need it to get there anymore
 realized I didn't need it anymore (2 cases)
 no new experiences on it
 it expanded my mind as far as possible
 learned on my own without it
 got out of it all I could

Christianity as an Alternative to Psychedelic Use -
(Twelve Cases)
 (heavy career drug users)

Some typical comments in this category are:

last trip incredibly bad - saw God who reviewed my life - showed me I would end up in prison - so I quit
 — realized I was a spiritual being on an acid trip - Satan is too strong on acid
 spiritual trips at first - toward the end, bummers
 acid was my saviour - quit when I accepted Christ
 was into a search for reality - God replaced drugs

Getting "Burned Out" as a Route Out of Psychedelic Use -
(Thirty-nine Cases)
 (heavy career drug users)

Some typical statements relating psychedelics with
 being "burned out" are:

personality couldn't handle acid
 bad experiences outweighed the good ones
 got too inward
 non-productive - deeply depressed on it
 I don't think I can handle it
 memory getting worse
 wasn't enjoying a lot of things
 causing severe psychological problems
 getting "lost" while high
 "losing frame of mind"
 thought I was losing my mind for awhile
 into a rut
 mentally taxing
 eventually they get to your body
 afraid of what it was doing to me
 enjoyed the after-trip more than the trip -
 if felt so good to come down
 losing my ability to cope
 with acid no one knows their limit
 "like using bad oil in a car - you can get by
 for awhile - but it will catch up with
 you"
 "felt like a mushroom"
 uses too much energy
 couldn't associate with others - argued with
 my friends
 began getting distorted preceptions after the
 trips
 "same old grind"
 "was killing me"
 see self as frail - frail person shouldn't do
 LSD
 "experience negative"
 weekends lost their worth
 feel some long-term physical effects are
 caused by it
 regrets doing acid - "I'm not like I used to
 be"

The above are approximately one third of the state-

ments that relate specifically to LSD or other potent hallucinogens and being "burned out". As can be seen, these drugs command respect in determining a large portion of heavy users that ended up in the "burned out" category.

Social Pressure from Specific (Ten Cases) -
General Others (Thirteen Cases)
 (heavy career drug users)

Specific others helped terminate the psychedelic careers of ten users and more general others the careers of twelve users. However, since all statements made refer to the general pattern of drug use, rather than to psychedelics specifically, there is nothing to add in this section.

Physical Damage as a Contingency in Psychedelic
"Failure" - (Two Cases)
 (heavy career drug users)

This category contained the two 17 year old women who contracted serum hepatitis. Although both women injected hallucinogens, neither blamed their hepatitis specifically on this drug.

In summary, the relationship between the light and heavy drug usage and the career contingencies that lead to cessation of a psychedelic drug habit are summarized below in Table 7. Again, the "weighty" quitting contin-

gencies are needed if the subject has made a rather strong commitment to the drug movement.

TABLE 7 ABOUT HERE

UPPERS AND DOWNERS

Since the emerging cessation patterns for uppers and downers are quite similar to each other, but quite different from the marijuana, psychedelic, or general patterns discussed earlier. They will be considered together.

For both the stimulants and depressants the heavy user, general pattern which was so important in making sense of the marijuana and psychedelic data appears irrelevant (except that heavy use of either drug contributed to the maintenance of that pattern). Rather, for these drugs quitting statements are far more drug-specific than was the case before. Other clear differences can also be seen. Upper and downer use is more apt to be a private affair, is frequently restricted to the facilitation of "instrumental" goals, and is more apt to involve the use of needles or "works" than was the case for the marijuana or psychedelic categories. Also, the tendency toward light use of speed or downers in the

light career drug user category and heavy use in the heavy career category is not maintained very well. That is, both heavy and light career patterns are represented by all varieties of speed and downer use.

Table 8, presented below, illustrates the use - quit pattern for both downers and uppers.

TABLE 8 ABOUT HERE

Three distinct quitting patterns are characteristic of both drugs. First, there are those who quit these drugs because initial use was defined as negative for some reason. This is usually the most frequent category. A second pattern is characterized by those who started out on an "instrumental" pattern which later became "recreational", and finally led to a "burn out" or loss of interest in the drugs. This is typical of persons on prescription amphetamines or tranquilizers who later begin to take the pills simply to get high. It is also typical of persons who use illegal drugs to study, stay awake at parties, go to sleep, come down off acid trips, etc. In either case the subject eventually takes too much and "burns out" or perceives that this would be the end result of a continued habit with these two drugs.

The final pattern is represented by those who simply "burn out" in a fashion similar to our discussion concerning the psychedelics. That is, the drugs were originally taken to get high, and continued use generated negative results at some later point in time.

Tables 9 and 10 illustrate how frequently these patterns are found in both the light and heavy drug career groups.

TABLES 9 AND 10 ABOUT HERE

As can be seen, there is only a slight carry-over of the general pattern to the more addictive drugs considered here. In the remainder of this section we will provide typical ex-user statements which reflect the three quitting dimensions for both speed and downers respectively.

Negative Reactions to Initial Speed Use (Fiftyseven Cases) (heavy career drug users)

Some of the statements typical of this category are:

used prescription speed once - couldn't control it
used two times - don't believe you should take pills into the body
probably won't use again
used speed once - shaky - didn't like
didn't like it at all - used two times

too fast naturally - clam up on speed
 used once - nervous effects - made me uneasy
 hates coming down
 used once - very intense headache
 used cocaine once - hurt nose
 used Vivarin a few times - got sick on it -
 never pleasant
 used once - it was unhealthy - body going too
 fast
 I got a nervous reaction out of it
 I didn't like it
 cocaine - burns nose - nose bleeds if do too
 much - easy to tell when a person is using
 it
 didn't like it at all - sat around and got
 shaky
 speed harmful
 Vivarin - too full of energy - couldn't cope
 with it
 hate speed - messes up my innards
 didn't care for coke or speed - really tense
 coke - burned throat - didn't like
 coke - intensified natural energy - no ability
 to direct it

Initial "Instrumental" Use of Speed Followed by
Perceived or Actual Negative Experiences -
(Fortyone Cases)
 (light and heavy career drug users)

Some typical statements in this category are:

no longer under schoolwork pressure
 used it to stay up and play bridge - don't
 like the way people's faces look on
 speed
 used it to stay awake - work - began to feel
 effects of intense use - suffered a deep
 emotional depression coming down - lost
 a lot of weight - emotional and physical
 wipe-out
 used Rx speed for weight - hate things "souped
 up"
 first used as diet plan - able to maintain
 weight now
 used 5 or 6 times to study or drive - hated
 crash - uptight

used under high stress in army - tendency to
burn you out - efficiency goes down - no
longer needed
used 10 or 12 times a year to study only -
seemed like a useless venture - crash bad -
wasn't worth it
used diet pills for three years - got sick on
them after extended use
on R_x speed - increased dose through time -
began exhibiting bizarre behavior - "they
were killing me"

Initial "Recreational" Use of Speed Followed by a
"Burn Out" on the Drug - (Forty Cases)
(light and heavy career drug users)

Some statements which are typical to this mode are:

used every other day - was getting burnt
used too much - bad trips - paranoia
used speed fairly frequently - could feel ef-
fects on body - obviously not good for
you
used coke three years - "I got hooked on it" -
got weaker - lost weight - tired - shot
crystal speed - burns brain up - tears
whole body up
injected speed - "I was mentally and physi-
cally shot"
one run 2½ weeks - "nightmare experience"
last speed took 7 hits - got sick
you get going too fast - detrimental to body
"puts me through too many changes" - mentally
addictive
you get sick of it after awhile - physically
sick also
speed - I just can't handle them anymore -
become schizoid - afraid of it

Several other comments must be made before closing
this section. First, for those who appreciate speed,
cocaine appears to be the drug of choice. Several refe-
rences were made to the use of cocaine as a sexual sti-

mulant and its "mellow nature" compared to most street speed. There is little question that if cocaine were available in quantity at a relatively economical price, it would rival marijuana in user interest.

Amyl nitrate, which is an inhalant form of speed for reviving heart attack victims, was used by a number of speed users. In all cases, the amyl nitrate rush was so intense and the physical damage to the lungs so apparent that use did not persist.

The characteristic quitting patterns for the downers (including all opiates) are identical to those of speed, and are presented below.

Negative Reactions to Initial Downer Use -
(Fiftyfour Cases)
 (light and heavy career drug users)

Some typical statements are:

Darvon - took two instead of one - felt like
 I had to pass out
 just wanted to try it
 didn't like them - just makes you sleepy
 nice but too dangerous
 it made me rather silly actually - dangerous -
 reactive with other drugs
 used opium once - couldn't tell what it was
 like - stoned already - too expensive -
 fear of addiction
 bad experiences - don't like effect - "mess
 up my head"
 didn't really do anything for me
 no bad experiences - except too down
 took downs while stoned - didn't like
 tried at school lunch hour - got dizzy - stag-
 gered

opium - didn't like cause too strong - availability - got kind of sick on it
 reds - in Korea from drug store - nothing much happened
 downers - never did like
 took barbiturates once by mistake - thought it was coke
 downers and I don't get along
 tried downers once - "repulsive"
 tried reds two times - put me in a stupor - nothing desirable
 PCP - "makes you crazy" - puts you out so far you may not come back
 stopped downers while still overseas - like being drunk - don't like that feeling
 fear of addiction

Initial "Instrumental" Use of Downers Followed by
Perceived or Actual Negative Experiences -
(Eleven Cases)
 (light and heavy career drug users)

In this subcategory downers are originally used instrumentally as prescription drugs or illegally as a means to come down from acid trips, as a substitute for alcohol or for some other illegitimate reason. Some typical statements are recorded below.

I used Darvons for headaches - got to where I liked it - haven't done for a long time
 used downers for two months - after heavy acid use
 Rx downers for health - "no benefit to it" - don't like the down feeling
 downers - did cause I was depressed - no longer get that depressed
 used downers extensively - my excuse was problems with my girlfriend - effected college grades alot - it was senseless to me - I had learned to discipline myself
 used downers to lower speed trips - didn't like - like narcoplexy

Initial "Recreational" Use of Downers Followed by a
"Burn Out" on the Drug - (Thirtyfive Cases)
 (light and heavy career drug users)

In this subcategory downers are originally used, not for an instrumental reason, but simply to get high. This pattern appears to work for awhile, with the subject realizing at a later time that continued use is having a bad physical or mental effect on the subject or could have if use weren't terminated. Some samples are listed below.

used barbiturates and codeine in Germany -
 started upping the dose so I quit
 began to feel the effects of the extreme use
 of barbiturates
 barbiturate use wasn't doing me any good
 Darvon - dropped and shot it - "liked it too
 much" - social work is a better tranquilizer
 Opium - I just decided to quit - I was skin
 popping in Okinawa
 doing syrup with friends - lost interest in
 it - just got tired of it
 did reds with friends - quit because I defined
 the numbness as perhaps permanent
 quit reds cause they make you angry
 used Codeine, barbiturates, heroin, and later
 cough syrup - saw was going nowhere on
 these, so quit
 felt a slight withdrawal from heroin once -
 said, "what am I doing to myself"
 heroin - shot up every day - quit when I moved
 to Wichita - "its a dead-end deal"
 used heroin in Viet Nam - starts to tear you
 down - "getting the best of me"
 tranquilizers every day - "I started scaring
 people" - tried to kill myself - decided
 I wanted to live
 PCP - too much of a "mind-fuck" - quit cause
 I found myself "really liking it"

Morphine - afraid to get near it again - was
hooked on it and friends helped me off
downers - I quit when I discovered I don't
like being down all the time - rather be
up
heavy use of tranquilizers - OK'd - in a coma
for six days
"I was a red freak" - got help from a rehab
agency
I liked downers - quit because of hepatitis

Some additional conclusions about downers are, perhaps, in order. First, it was suspected that there would be difficulty finding respondents who had used hard narcotics. This proved to be a faulty assumption. Thirty-five out of the 99 quitters had used heroin, morphine or methadone, either by smoking, "skin-popping" or intravenous injection. This does not include opium smoking, which was quit popular in the sample, regardless of this heavier involvement.

Second, use of these really heavy addictive substances only followed the classic, mass media pattern or "Reader's Digest" dialogue in two cases. These were middle aged female subjects who got involved with heroin before the current "drug movement" took shape in the middle 1960's. For the other subjects, the use of these drugs was defined as "highly experimental" and was never intended to become a life style. As such, these subjects don't seem to define themselves in terms of being physically addicted or not, but rather in terms of becoming

psychologically dependent or not. Perhaps this makes it easier for them to quit, which they invariably did, without the trials and tribulations described in the two pre-1960 cases. Where physical addiction did result in the larger body of subjects, going "cold turkey" appears much easier than is usually described.

INHALANTS

The pattern of inhalant use by type of drug career is illustrated in Table 11.

TABLE 11 ABOUT HERE

All nineteen of these cases are quitters. Since the relative number of the inhalant users is small, no pattern can be extracted from the data with any reliability. As such, brief descriptions of these nineteen career involvements and the reasons for quitting are listed below and are intended to be simply an interesting addition to this study. It might be important to know, however, that a few of the inhalant users started very young, and under rather innocent circumstances. The rest defined their use as "highly experimental" due to the fact that these substances are reputed to cause brain damage.

Light Career Drug Users Who Did Inhalants -
(Two Cases)

glue - started when young - built model planes -
 used with friends - "I grew out of it"
 did glue with his group - it was starting to
 become a habit - 6-7 months - "blowing my
 mind" - bad for brain cells

Heavy Career Drug Users Who Did Inhalants -
(Seventeen Cases)

glue - 8th grade - quit because, "it's a bunch
 of shit" - really bad for you - didn't
 want to ruin my brain

Pam - inhaled it at a party once - saw friend
 almost die on it - wouldn't do again

started on glue '66-'67 because couldn't get
 any dope - had heard about drug movement -
 quit when got dope

glue - didn't like it - used in 9th grade

glue - started when 15-16 years old

did 2 years with others - "it just got old" -
 stole in front of guards - got shot at

after being high on acid once - tried to inhale
 Pam - quit cause heard 5 persons died
 from it

glue - decided it was a bum trip - so quit after
 a couple of weeks

laughing gas (nitrous oxide) - makes an animal
 out of a person and that's too much for
 her

freon and nitrous oxide - seemed apparent that
 it was hard on body and mind - high wasn't
 that good - bad to wake up from it - like
 returning from the dead - fuzzy conscious-
 ness 10 seconds after return

Pam - used once - knew it wasn't good for you
 glue - 2-3 months - regrets her experience -
 saw people "burned out" on it - stopped
 because "I couldn't remember my name"

sniffed glue once - saw decay in others

glue - paint thinner - nitrous oxide - aerosol
 cans - glue when 16 - she didn't like it
 at all - not enough control to suit her

glue - didn't enjoy it at all

REFERENCES

¹The variety of illegal and pharmaceutical drugs falling under each of these four categories is immense. Actual users, however, have a much more limited range of experience with all possible substances in these ranges. As such, any standard sociological text on drug use will suffice to familiarize the reader with the "street" terms for these substances.

BIBLIOGRAPHY

- Becker, Howard
1953 "Becoming a marijuana user." American Journal of Sociology 59:235-242
- Carey, James T.
1968 The College Drug Scene. Englewood Cliffs, New Jersey: Prentice-Hall.
- Carey, James T. and Jerry Mandel
1968 "A San Francisco Bay Area 'speed' scene." Journal of Health and Social Behavior 9:164-174.
- Firestone, Harold
1957 "Cats, kicks and color." Social Problems 5:3-13
- Klein, Julius and Derek L. Phillips.
1968 "From hard to soft drugs: temporal and substantive changes in drug usage among gangs in a working-class community." Journal of Health and Social Behavior 9:139-145.
- Larner, Jeremy and Ralph Tefferteller
1964 The Addict in the Streets. New York: Grove Press.
- Lindesmith, Alfred
1947 Opiate Addiction. Bloomington, Indiana: Principia Press.
- Ray, Marsh B.
1961 "The cycle of abstinence and relapse among heroin addicts." Social Problems 2:132-140.
- Sutter, Alan G.
1969 "Worlds of drug use on the street scene." Pp. 802-829 in Donald R. Cressey and David A Ward (eds.), Delinquency, Crime and Social Process. New York: Harper & Row.

TABLE 2
Light Career Drug Users

Quitters of Marijuana by Original
Positive or Negative Reaction to
the Drug by Type of Drug Pattern
(in percentages)

Type of Drug Pattern	Quitters of M Initial Reactions Negative		Quitters of M Initial Reactions Positive	
	N	%	N	%
	9	39.1	13	34.2
Marijuana only				
M* + one other drug	7	30.4	11	28.9
M + 2 other drugs	2	8.7	6	15.8
M + 3 other drugs	5	21.7	8	21.1
M + 4 other drugs	-	0.0	-	0.0
	23	99.9	38	100.0

M* Marijuana and its Derivatives

TABLE 3

Light Career Drug Users

Quitters of Marijuana by Original
Positive or Negative Reactions
to the Drug by Sex of Respondent*
(in percentages)

	Quitters of Marijuana Original Reactions		Quitters of Marijuana Original Reactions	
	N	%	N	%
Female	14	60.9	16	42.1
Male	9	39.1	22	57.9
	<u>23</u>	<u>100.0</u>	<u>38</u>	<u>100.0</u>

*The total sample was made up of 31% (76) females and 69% (169) males.

TABLE 4
Heavy Career Drug Users
Quitters and Users of Marijuana by
Type of General Quitting Pattern

	Quit		Use	
	Marijuana		Marijuana	
	N	%	N	%
Meditation	7	53.8	6	46.2
Christianity	9	75.0	3	25.0
Pressure/Others	15	65.2	8	34.8
Burn Outs	3	6.0	47	94.0
Physical Damage	2	100.0	-	0.0

7 subjects used all drugs heavily so are unclassified here

*1 Labels do not correspond perfectly to labels used in the text

General
 Quitting Pattern*1

TABLE 5
Light and Heavy Career Drug Users
Marijuana Quitting Patterns by
Light and Heavy Career Drug Patterns

	Light career drug users		Heavy career drug users	
	Not like M*3		Liked M	
	N		N	All liked M N
Removal of "coercion to use"	2	-	-	-
A "nothing experience"	5	-	-	-
Strong dislike (physical)	6	2*2	2	-
Strong dislike (mental)	9	3	3	-
Geographical change	-	6	6	-
Social pressure from others (specific)	-	13	13	7
Social pressure from others (general)	-	10	10	8
Meditation	-	2	2	7
Christianity	-	-	-	9
Getting "burned out"	-	3	3	3
Physical Damage	-	-	-	2

*1Labels do not correspond perfectly to labels used in the text.

*2Both cells combined in the text.

*3Marijuana and its derivatives.

Marijuana Quitting Patterns*1

TABLE 6
Heavy Career Drug Users
Quitters and Users of Psychedelics
by Type of General Quitting Pattern
(in percentages)

	Quit Psychedelics		Use Psychedelics		Never Used Psychedelics	
	N	%	N	%	N	%
Meditation	13	100.0	-	--	-	--
Christianity	12	100.0	-	--	-	--
Pressure/Others	23	100.0	-	--	-	--
Burn Outs	39	78.0	7	14.0	4	8.0
Physical Damage	2	100.0	-	--	-	--

*¹ Labels do not correspond perfectly to labels used in the text

General
Quitting Pattern*¹

TABLE 7
Light and Heavy Career Drug Users
Psychedelic Quitting Patterns by Light and Heavy
Career Drug Patterns

	Light Careers	Heavy Careers
	N	N
Nothing Experience	12	--
Too Intense	20	--
Bad Trips Always	10	--
Bad Trips Toward End (Light) + Burnouts (Heavy)	13	39
Social Pressure from Others (Specific)	5	10
Social Pressure from Others (General)	5	13
Meditation	12	13
Physical Worry (Light) Actual (Heavy)	9	2
Christianity	--	12

Psychedelic
 Quitting Pattern*1

*1 Labels do not correspond perfectly to labels used in text

TABLE 8

Light and Heavy Career Drug Users
 Quitters and Users of Speed and Downers by
 Light and Heavy Drug User Patterns
 (in percentages)

	Light career drug users			Heavy career drug users		
	N		N never used	N		N never used
		%			%	
Quit speed	59	77.6	59	79	79.0	7
Uses speed	17	22.4		21	21.0	
Total	76	100.0		100	100.0	
Quit downers	41	74.5	80	59	74.7	28
Uses downers	14	25.5		20	25.3	
Total	55	100.0		79	100.0	

TABLE 9
Light and Heavy Career Drug Users
Type of Speed Quitting Pattern by
Type of General Quitting Pattern
(in percentages)
Speed Quitting Pattern*¹

General Quitting Pattern*¹

	Original experience negative		"Instrumental" burn outs		"Recreational" burn outs	
	N	%	N	%	N	%
Light career users (Rest heavy)	28	47.5	21	35.6	10	16.9
Meditation	8	66.6	2	16.7	2	16.7
Christianity	4	36.4	2	18.2	5	45.4
Pressure/others	4	25.0	6	37.5	6	37.5
Burn Outs	13	34.2	10	26.3	15	39.5
Physical Damage	-	-	-	-	2	100.0

*¹Labels do not correspond perfectly to labels used in the text.

TABLE 10
Light and Heavy Career Drug Users
Type of Downer Quitting Pattern by
Type of General Quitting Pattern
(in percentages)
Downer Quitting Pattern*¹

General Quitting Pattern*¹

	Original experience negative		"Instrumental" burn outs		"Recreational" burn outs	
	N	%	N	%	N	%
Light career users (Rest heavy)	26	63.4	7	17.1	8	19.5
Meditation	11	91.7	-	-	1	8.3
Christianity	5	50.0	-	-	5	50.0
Pressure/others	5	45.4	2	18.2	4	36.4
Burn outs	7	29.2	2	8.3	15	52.5
Physical damage	-	-	-	-	2	100.0

*¹Labels do not correspond perfectly to labels used in the text.

TABLE 11
Light and Heavy Career Drug Users
Number of Inhalant Quitters by
General Quitting Pattern

	Inhalant user-quitters N	Non-users N	Total N	User-quitters as % of total
Light career users	2	133	135	1.5
(Rest heavy)				
Meditation	2	11	13	15.4
Christianity	3	9	12	25.0
Pressure/others	3	20	23	13.0
Burn outs	9	41	50	18.0
Physical damage	0	2	2	0.0

*Labels do not correspond perfectly to labels used in the text.

General Quitting Pattern*1